



DEPARTMENT OF HEALTH AND HUMAN SERVICES
NAVAJO REGION
INDIAN HEALTH SERVICE



VACANCY ANNOUNCEMENT

FD-08-99

OPENING DATE

September 26, 2008

CLOSING DATE

October 9, 2008

POSITION

Data Transcriber

LOCATION AND DUTY STATION

Medical Records Department
Fort Defiance Indian Hospital- Fort Defiance, AZ

GRADE/SALARY

GS-356-03, \$23,667 ~ 30,767 Per Annum
GS-356-04, \$26,569 ~ 34,545 Per Annum

NUMBER OF VACANCIES

One (1) Vacancy: MD1768

APPOINTMENT: Permanent

WORK SCHEDULE: **Full Time

AREA OF CONSIDERATION: Commuting Area

PROMOTION POTENTIAL: Yes, to Grade: 04

SUPERVISORY/MANAGERIAL: NO

HOUSING: Private Housing **ONLY**

TRAVEL/MOVING: NO EXPENSES PAID

DUTIES: Incumbent operates RPMS peripheral (CRT) and office automated equipment for the purpose of key entering data for the process of exporting data to respective destinations. Analyzes and interprets medical information from the PCC encounter form accurately utilizing the PC automated encoder. The ICD-9-CM is used to code the final diagnoses results and pharmacy visits. Incumbent key enters data based on the codes that are applied by the coder. Responsible for merging clinical visits with proper ancillary service provided. Responsible for analyzing documents for accuracy, consistency, legibility, proper coding symbols, locates misplaced data on source documents and corrects errors before finalizing data for input. Determines actions needed to locate and correct errors on input documents that are ordinarily edited by the systems, detects errors through recognition and knowledge of job format. Retrieves data, enters data into the systems initially, and corrects and updates data as system permits. Reports all deficiencies to the PCC Coordinator. Maintains a daily report for PCC forms processed and all deficiencies for performance improvement tracking purposes. Maintains log of any deficiencies encountered for data entry. Maintains reference material on all phases of operation of the PCC. Performs simple equipment maintenance tasks and advises supervisor of detected systems or equipment malfunctions. Communicates with supervisor in resolving coding and software problems. Responsible for assuring those Compliance issues in relation to abstracting and coding are adhered to. Performs other duties as assigned.

QUALIFICATION REQUIREMENTS: YOUR DESCRIPTION OF WORK EXPERIENCE, LEVEL OF RESPONSIBILITY, AND ACCOMPLISHMENTS WILL BE USED TO DETERMINE THAT YOU MEET THE FOLLOWING REQUIREMENTS.

POSITIVE EDUCATION REQUIREMENT: NONE

LICENSURE REQUIRED: NONE

BASIC QUALIFICATIONS: Candidates must have 26 weeks of general experience to qualify for the GS-03 grade level, and 52 weeks of general experience for the GS-4 level..

GENERAL EXPERIENCE: Progressively responsible clerical, office, or other work that indicates ability to acquire the particular knowledge and skills needed to perform the duties of the position to be filled.

SUBSTITUTION OF EDUCATION FOR EXPERIENCE: GS-03: Successfully completed one (1) year of education above the high school level. GS-04: Successfully completed two (2) years of education above the high school in any field for which high school graduation or the equivalent is the normal prerequisite is creditable. This education must have been obtained in an accredited business, secretarial or technical school, junior college, college or university.

SELECTIVE PLACEMENT FACTOR: NONE

THIS POSITION IS LOCATED IN A TOBACCO-FREE ENVIRONMENT

TIME-IN-GRADE REQUIREMENTS: A candidate may be advanced to a position in grade GS-4 or below if:

- (1) The position is no more than two grades above the lowest grade level he/she held within the proceeding year under non-temporary appointment; or
- (2) He/she met the above restriction for advancement of the grade of the position to be filled, at any time in the past; or
- (3) He/she previously held a position to be filled, at any time under any type of appointment.

LEGAL AND REGULATORY REQUIREMENTS: Candidates must meet time-after-competitive appointment, time-in-grade, and qualification requirements by the closing date of the vacancy announcement.

CONDITION OF EMPLOYMENT: Immunization Requirement - All persons born after 12-31-56 must provide proof of immunity to Rubella and Measles. Serology testing to confirm immunity and/or immunizations will be provided free of charge. Special consideration may be allowed to individuals, who are allergic to a component of a vaccine, have a history of severe reaction to a vaccine, or who are currently pregnant. This applies to candidates for positions in any Service Unit or any Area Office position, which requires regular work at a Service Unit.

REASONABLE ACCOMMODATION: This agency provides reasonable accommodations to applicants with disabilities. If you need a reasonable accommodation for any part of the application and hiring process, please notify the agency. The decision on granting reasonable accommodation will be on a case-by-case basis.

NOTE: Refer to OPM Operating Manual Qualification Standard Handbook or IHS Excepted Service Qualification Standard, Series **GS-356** for complete information. Substitution of education for experience will be made in accordance with those standards. For more complete information, contact your servicing Personnel Office.

WHO MAY APPLY:

Merit Promotion Plan (MPP) Candidates: Applications will be accepted from status eligibles (e.g., reinstatement eligibles and current permanent employees in the competitive Federal service) and from current permanent IHS employees in the Excepted Federal Service who are entitled to Indian Preference.

Excepted Service Examining Plan (ESEP) Candidates: Applications will be accepted from individuals entitled to Indian Preference. Current Permanent IHS Excepted Service employees and Competitive Service employees or Reinstatement eligibles entitled to Indian Preference may also apply under the provisions of the Indian Health Service Excepted Service Examining Plan. These candidates **MUST** indicate on their application whether their application is submitted under the IHS Excepted Service Examining Plan or both.

Applications will also be accepted from individuals eligible for non-competitive appointment (e.g., applicants eligible for appointment under the Veterans Readjustment Act, the severely handicapped, those with a 30% or more compensable service-connected disability).

INFORMATION FOR DISPLACED EMPLOYEES REQUESTING SPECIAL SELECTION PRIORITY CONSIDERATION UNDER THE INTERAGENCY CAREER TRANSITION ASSISTANCE PROGRAM (ICTAP):

If you are a displaced Federal employee, you may be entitled to receive special priority selection under the ICTAP. To receive this priority consideration, you must:

1. Be a displaced Federal employee. You must submit a copy of the appropriate documentation such as a RIF separation notice, a letter from OPM or your agency documenting your priority consideration status with your application package. The following categories of candidates are considered displaced employees:
 - A. Current or former career or career-conditional (tenure group I or II) competitive service employees who:
 1. Received a specific RIF separation notice; or
 2. Separated because of a compensable injury, whose compensation has been terminated, and whose former agency certifies that it is unable to place; or
 3. Retired with a disability and whose disability annuity has been or is being terminated; or
 4. Upon receipt of a RIF separation notice returned on the effective date of the RIF and submits a SF-50 that indicates "Retirement in lieu of RIF"; OR
 5. Retired under the discontinued service retirement option; or
 6. Was separated because he/she declined a transfer of function or directed reassignment to another commuting area. OR
 - B. Former Military Reserve or National Guard Technicians who are receiving a special Office of Personnel Management (OPM) disability retirement annuity under section 8337 (h) or 8456 or Title 5 United States Code.

2. Be applying for position as or below the grade level of the position from which you have been separated. The position at or below must not have a greater promotion potential than the position from which you are separated.
3. Have a current (or last) performance rating of record of at least fully successful or equivalent. This must be submitted with your application package. (This requirement does not apply to candidates who are eligible due to compensable injury or disability retirement.)
4. Occupy or be displaced from a position in the same local commuting area of the position for which you are requesting priority consideration.
5. File your application by the vacancy announcement closing date and meet all the application criteria (e.g., submit all required documentation, etc)
6. Be rated well qualified (a score of 80 on a rating scale of 70 to 100) for the position including documented selective factors, quality ranking factors, physical requirements with reasonable accommodations and is able to satisfactorily perform the duties of the position upon entry.

EVALUATION CRITERIA: Evaluation will be made of Experience, Performance Appraisals, Training, Letters of Commendation, Self-Development, Awards and Outside Activities, which are related to this position. To receive full credit for your qualifications, provide a narrative statement, which describes fully all aspects of your background as they relate to the knowledge, skills, and abilities (KSA's) outlined below and show the level of accomplishments and degree of responsibility.

The KSA's in your narrative statement will be the principle basis for determining whether or not you are highly qualified for the position. Describe your qualification in each of the following.

1. *Knowledge of ICD-9-CM and CPT-4 Coding Procedures.*
2. *Knowledge of Medical Terminology.*
3. *Knowledge of computerized data entry and information processing systems.*
4. *Ability to work independently and/or under pressure, and to prioritize work assignments and meet deadlines.*
5. *Knowledge of legal requirements for medical records.*

SEE ATTACHED SUPPLEMENTAL QUESTIONNAIRE FOR DEFINITIONS.

NOTE: The *Declaration for Federal Employment (OF-306)* and *Addendum to the Declaration for Federal Employment* must be completed and submitted with original signature to determine your suitability for Federal employment, to authorize a background investigation, and to certify the accuracy of all the information in your application. Responding "yes" to any one of these two questions on the *IHS Addendum* can make you ineligible for employment in this position. **If you make a false statement in any part of your application, you may not be hired; you may be fired after you begin work; or you may be fined or jailed.**

HOW & WHERE TO APPLY: All applicants must submit **ONE** of the following to the Fort Defiance Indian Hospital, Human Resources Department, P. O. Box 649, Fort Defiance, AZ 86504, by close of business (5:00 PM) on the closing date. For more information contact: *Sarah V. Morgan, HR Specialist at (928) 729-8265.*

1. OF-612, Optional Application for Federal Employment; **OR**
2. Resume; **or**,
3. Other written application formats plus college transcripts, a copy of your most recent performance appraisal any other necessary documentation pertinent to the position being filled.

A **copy** of an **Official Bureau of Indian Affairs Preference Certificate, BIA Form 4432, signed by the appropriate BIA Official**, must be submitted if the applicant claims Indian Preference. Navajo Area Indian Health Service employees claiming Indian Preference need not submit the BIA Form 4432, but **MUST** state that such documentation is contained in their Official Personnel Folder.

INFORMATION REQUIRED FOR RESUMES AND OTHER APPLICATION FORMATS: Resumes or other application formats must contain all of the information listed below in sufficient detail to enable the personnel office to make a determination that you have the required qualifications for the position. ***SPECIFICALLY, THE INFORMATION PROVIDED UNDER #8 (HIGH SCHOOL), #9 (COLLEGES AND UNIVERSITIES) AND #10 (WORK EXPERIENCE) WILL BE USED TO EVALUATE YOUR QUALIFICATIONS FOR THIS POSITION. FAILURE TO INCLUDE ANY OF THE INFORMATION LISTED BELOW MAY RESULT IN LOSS OF CONSIDERATION FOR THIS POSITION.***

1. Announcement Number, Title and Grade of the job for which you are applying.
2. Full Name, Mailing Address (with Zip Code) and Day and Evening Phone Numbers (with Area Codes).
3. Social Security Number.
4. Country of Citizenship.

5. Veteran's Preference Certificate: DD-214, indicating discharge and/or SF-15 if claiming 10-point preference. Veteran's Preference is not applicable to current DHHS permanent employees, Federal employees with competitive status, or reinstatement eligibles.
6. Copy of the latest SF-50, Notification of Personnel Action, if current or prior Federal employee.
7. Highest Federal civilian grade held (give series and dates held).
8. High School: Name, City, State (Zip Code if known) and date of Diploma or GED.
9. Colleges and Universities: Name, City, State (Zip Code if known), majors, type and year of any degrees received (if no degree, show total semester or quarter hours earned); preferably attach transcripts.
10. Work Experience (Paid and Non-Paid): Job title, duties and accomplishments, employer's name and address, supervisor's name and phone number, starting and ending dates (month/year), hours per week, and salary.
11. Indicate if we may contact your current supervisor.
12. Job related training courses, skills, certificates, registrations and licenses (current only), honors, awards, special accomplishments.

ADDITIONAL INFORMATION WILL NOT BE SOLICITED BY THIS OFFICE.

NOTE: Persons who submit incomplete applications will be given credit only for the information they provide and may not, therefore, receive full credit for their veteran preference determination, Indian preference, education, training, and/or experience.

ADDITIONAL SELECTIONS: Additional or alternate selections may be made within 90 days from the date the certificate was issued if the position becomes vacant or to fill an identical additional position in the same geographic location.

INDIAN PREFERENCE: Preference in filling vacancies is given to qualified Indian candidates in accordance with the Indian Preference Act. In other than this, the IHS is an Equal Opportunity Employer.

VETERANS PREFERENCE: Veterans who are preference eligible or who have been separated from the armed forces under honorable conditions after three (3) years or more of continuous active service may apply.

SELECTIVE SERVICE CERTIFICATION: If you are male born after 12-31-59, and you want to be employed by the Federal Government, you must (subject to certain exemptions) be registered with the Selective Service System. Submit a copy of Selective Service Registration to verify compliance.

EQUAL EMPLOYMENT OPPORTUNITY: SELECTION FOR POSITIONS WILL BE BASED SOLELY ON MERIT WITH NO DISCRIMINATION FOR NON-MERIT REASONS SUCH AS RACE, COLOR, RELIGION, GENDER, SEXUAL ORIENTATION, NATIONAL ORIGIN, POLITICS, MARITAL STATUS, PHYSICAL HANDICAP, AGE, OR MEMBERSHIP OR NON-MEMBERSHIP IN AN EMPLOYEE ORGANIZATION. PROMOTION OR APPOINTMENTS WILL NOT BE BASED ON PERSONAL RELATIONSHIP OR OTHER TYPES OF PERSONAL FAVORITISM OR PATRONAGE.

/S/ _____

Human Resource Clearance

Date

EACH APPLICATION FORM AND DOCUMENT MUST BE INDIVIDUALLY IDENTIFIED BY THIS ANNOUNCEMENT NUMBER – **FD-08-99** ALL ORIGINAL DOCUMENTS AND COMPLETED APPLICATION FORMS MUST BE DUPLICATED BY THE APPLICANT BEFORE SUBMISSION AS WE DO NOT HONOR XEROX REQUESTS. THE APPLICATION AND ATTACHMENTS BECOME THE PROPERTY OF THIS PERSONNEL OFFICE AND WILL NOT BE RETURNED. ORIGINAL SIGNATURES ARE REQUIRED ON THE APPLICATION FORM AND THE SUPPLEMENTAL QUESTIONNAIRE. ONLY MATERIAL SUBMITTED BY THE CLOSING DATE WILL BE CONSIDERED.

ELECTRONIC OR FAXED APPLICATION OR DOCUMENTS WILL NOT BE ACCEPTED.

Applications mailed using government postage or through an internal government mail system will not be considered.

SUPPLEMENTAL QUESTIONNAIRE
Data Transcriber; GS-356-04/03

1. **KNOWLEDGE OF ICD-9 AND CPT-4 CODING PROCEDURES.** The person in this position must have the knowledge of the ICD-9 and CPT-4 diagnostic and procedure system in order to properly assign most appropriate codes to the outpatient clinic encounters. What in your background indicates you possess this knowledge?

What was the duration of these activities?

Who can verify this information? (Please provide a telephone number.)

2. **KNOWLEDGE OF MEDICAL TERMINOLOGY.** This person must have the knowledge of medical terminology, disease processes and anatomy and physiology as it relates to medical record functions and activities. What in your background indicates you possess this ability?

What was the duration of these activities?

Who can verify this information? (Please provide a telephone number.)

3. **KNOWLEDGE OF COMPUTERIZED DATA ENTRY AND INFORMATION PROCESSING SYSTEMS.** The person in this position must have the knowledge and skill to utilize computer data entry system to enter Patient Care Component and Patient Registration Information. What in your background indicates you possess this ability?

What was the duration of these activities?

Who can verify this information? (Please provide a telephone number.)

4. **ABILITY TO WORK INDEPENDENTLY AND/OR UNDER PRESSURE AND TO PRIORITIZE WORK ASSIGNMENTS AND MEET DEADLINES.** The person in this position must have the ability to work effectively under pressure of time and still produce quality work products. This includes the ability to work with frequent interruptions and still meet deadlines. What in your background indicates you possess this ability?

What was the duration of these activities?

Who can verify this information? (Please provide a telephone number.)

5. **KNOWLEDGE OF LEGAL REQUIREMENTS FOR MEDICAL RECORDS.** The person in this position must have the knowledge of legal requirements pertaining to medical records including state, federal and tribal regulations and guidelines' Privacy Act, Alcohol & Drug Abuse, the IHS is required to conduct medical records business and directions. What in your background indicates you possess this ability?

What was the duration of these activities?

Who can verify this information? (Please provide a telephone number.)

CERTIFICATION

I *CERTIFY* that all of the statements made in the above questionnaire are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Signature of Applicant

Date